Approved for use through 7/31/2006, OMB 0661-0032 U.S. Petent and Trademert Office; U.S. DEPARTMENT OF COMMERCE the ere required to respond to a collection of information unless a displaye a walld CMB control number.

PATEN	ON RECORD ctive December 8, 2004		10478 349					
APPLICATION AS FILED - PART I (Column 1) (Column 2)				SMALL ENTITY		. OR	OTHER THAN SMALL ENTITY	
FÓR .	NUMBER FAL	ED MUM	BER EXTRA	RATE (I)	FEE (I)		RATE (S)	PEC (3)
USIC FEE FOFR 1 16(4) (b) or (c))	N/A		N/A	N/A	150.00		N/A .	300.00
EARCH FEE I CFR 1 16(U, 10, or (mt)	NA		N/A		\$250	1	· N/A	\$500
WHINATION FEE	N/A		RAZA.		\$100		- NA	\$200
TAL CLARAS LOFR 1-16(0)	·	. 70				OR	X\$50 .	
DEPENDENT CLAIMS OFR 1 16(N)	ENDENT CLAIMS			X100 .			X200	
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
NETIPLE DEPENDENT CLAIM PRESENT (37 OFR 1 16(1))				.+180=		·	+360=	
the difference in column 1 is less than zero, enter 'V' in column 2.				TOTAL		٠,	' TOTAL	-:-
17 13 07 RE	CLÁIMS . MAINING AFTER FNIOMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDI- TIONAL FEE AL		RATE (\$)	ADDI- TIONAL ESE M
	ENDMENT Minus	PAID FOR	 	X\$ 25	FEE (8)		X\$50	FEE (\$)
Independent · *	1 Minus	1 2	-	X100 -	·	OR	X200	
Application Size Fee	D1 CFR 1.16(a))	1	1	1		OR	-	
PRST PRESENTATION OF MILITIPLE DEPENDENT CLAIM (37 CFR 1.190)				+160=	·	OR	+360=	
				TOTAL ADD'L FEE		OR	TOTAL ADO'L FEE	
	lumn 1)	. (Column 2)	(Column 2)	· .		•		
23 F RE	LAINS MAINING UFTER. NOMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (I)	ADDI- TIONAL FEE (5)	•	RATE (\$)	ADOI- TIONAL FEE (5)
Total 1	Minus	4 00	- /	X\$ 25 a		OR .	Veen	
Total grown Lagu	10	20		1		O11 .	X\$50 -	
GF GFR LEDD) Independent GF GFR LIGH)	Minus		•/	X100 _		OR -	X200 .	
GT GFR LEDG)	i Minus	 		l			Y000	
Endopendent ENTOPRILITY	Minus 37 CFR 1.16(e))	- 3.	•/				Y000	

of the entry in column 1 is less than the entry in column 2, write "V in column 3.

If the "Righest Number Previously Paid For" IN THIS SPACE is less than 20, order "20".

If the Tighest Number Previously Paid For" tin THIS SPACE is less than 3, enter "2".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the TO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. thing gethering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any companies as amount of time you require to complete his form and/or suggestions for redocing this burden, should be sent to the Chief Indemnation Officer, U.S. Peterni Indemnation Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS RESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.